



QUESTIONNAIRE

OHIO COUNTY OCCUPATIONAL TAX

P. O. Box 185

Hartford, Kentucky 42347

Phone: (270) 298-4410 Fax: (270) 298-4409

Every business (including farming, sales, rentals, etc.) or individual subject to the Occupational License Fee (Ordinance 95-4 Ohio County, Kentucky) is required to complete this questionnaire and return it to the Ohio County Occupational Tax Administrator.

The following information is necessary and will be held in strict confidence. Answer all applicable questions.

Name or Business / Trade Name: _____

Business Address: _____

Mailing Address (if different from above): _____

Telephone Number: _____ Fax Number: _____

Start Up Date in Ohio County: _____ / _____ / _____
Month Day Year

Nature of Business: _____

* Working in *Bluegrass Crossings Industrial Park*? YES _____ NO _____

Type of Business (Circle One) Corporation S Corporation Non-Profit
Sole Proprietorship Partnership Other(state)

Owners/Partners Names: _____

Corporate Officers & Titles: _____

Social Security Number: _____ or Federal EIN: _____

Do you have employees in Ohio County? Yes _____ No _____ If so, How many? _____

Do you have sub-contractors in Ohio County? Yes _____ No _____ If yes, attach sheet with information

Accounting Period: (circle one) A. Calendar Year **OR** B. Fiscal Year Ends ____ / ____ / ____

Do you rent/lease your business location in Ohio County? Yes _____ No _____

If rent/lease, from: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: Name, Address, and Telephone Number: _____

I hereby certify that all information and statements herein are true and correct:

Signature _____ Title _____ Date _____

PLEASE COMPLETE AND RETURN WITHIN TEN (10) DAYS